


# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1 Filer ID (Ethics Commission Filers)</b>	<b>2 Total pages filed:</b> 8
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR      FIRST      MI Mr      John      R		<b>OFFICE USE ONLY</b>  Date Received    BY: <i>[Signature]</i>
	NICKNAME      LAST      SUFFIX Ryan		
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;      APT / SUITE #;      CITY;      STATE;      ZIP CODE P.O. Box 97      Denton      TX      76202		
<b>5 CANDIDATE / OFFICEHOLDER PHONE</b>	AREA CODE      PHONE NUMBER      EXTENSION ( 940 ) 206-7213		
<b>6 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR      FIRST      MI Mrs      Bette      S NICKNAME      LAST      SUFFIX Sherman		
<b>7 CAMPAIGN TREASURER ADDRESS</b>  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);      APT / SUITE #;      CITY;      STATE;      ZIP CODE 3411 Shadow Brook Court      Denton      TX      76210		
<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE      PHONE NUMBER      EXTENSION (940 ) 380-0926		
<b>9 REPORT TYPE</b>	<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> January 15      <input checked="" type="checkbox"/> 30th day before election      <input type="checkbox"/> Runoff                             </div> <div> <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)                             </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> <input type="checkbox"/> July 15      <input type="checkbox"/> 8th day before election      <input type="checkbox"/> Exceeded \$500 limit                             </div> <div> <input type="checkbox"/> Final Report (Attach C/OH - FR)                             </div> </div>		
<b>10 PERIOD COVERED</b>	<div style="display: flex; justify-content: space-between;"> <div>                         Month      Day      Year                          1 / 1 / 2019                     </div> <div>THROUGH</div> <div>                         Month      Day      Year                          3 / 25 / 2019                     </div> </div>		
<b>11 ELECTION</b>	<div style="display: flex; justify-content: space-between;"> <div> <b>ELECTION DATE</b>                          Month      Day      Year                          5 / 4 / 2019                     </div> <div> <b>ELECTION TYPE</b>  <input type="checkbox"/> Primary      <input type="checkbox"/> Runoff      <input type="checkbox"/> Other Description  <input checked="" type="checkbox"/> General      <input type="checkbox"/> Special                     </div> </div>		
<b>12 OFFICE</b>	OFFICE HELD (if any)  Denton City Council, District 4		
<b>13 OFFICE SOUGHT (if known)</b>			

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME

John Ryan

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

☐ SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 165.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 3915.00

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 187.05

4. TOTAL POLITICAL EXPENDITURES \$ 1538.28

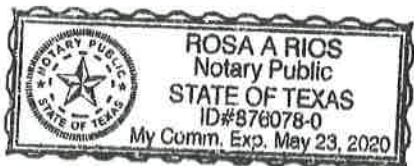
CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 2996.53

OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 4700.00

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*[Signature]*

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said John Ryan, this the 4th day of April, 20 19, to certify which, witness my hand and seal of office.

*[Signature]*

Signature of officer administering oath

Rosa A. Rios

Printed name of officer administering oath

Notary Public

Title of officer administering oath

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3****19 FILER NAME**

John Ryan

**20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE****SUBTOTAL  
AMOUNT**

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3750.00
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$1351.23
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
3**2** FILER NAME

John Ryan

**3** Filer ID (Ethics Commission Filers)**4** Date

1/24/19

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Keith Wise

**6** Contributor address;

City; State; Zip Code

4 Wellington Oaks Cir

Denton, TX 76210

**7** Amount of contribution (\$)

\$100.00

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

1/24/19

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Glenn Carlton

Contributor address;

City; State; Zip Code

13217 Cash Mills Road

Sanger TX 76266

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/24/19

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mike Donnelly

Contributor address;

City; State; Zip Code

302 East Carruth Lane Double Oak TX 75077

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/24/19

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Frank and Marta Dudowicz

Contributor address;

City; State; Zip Code

3605 Falcon Court Denton, TX 76210

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
3

2 FILER NAME

John Ryan

3 Filer ID (Ethics Commission Filers)

4 Date

1/24/19

5 Full name of contributor

Carl Anderson

☐ out-of-state PAC (ID#:

6 Contributor address;

City; State; Zip Code

114 Mustang Trl Shady Shores, TX 76208

7 Amount of contribution (\$)

\$100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/24/19

Full name of contributor

Barbara and Benny Russell

☐ out-of-state PAC (ID#:

Contributor address;

City; State; Zip Code

1324 Heather Lane Denton TX 76209

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/28/19

Full name of contributor

Dena Meek

☐ out-of-state PAC (ID#:

Contributor address;

City; State; Zip Code

560 Diamond Point Oak Point TX 76068

Amount of contribution (\$)

\$300.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/4/19

Full name of contributor

Jill and Forrest Beadle

☐ out-of-state PAC (ID#:

Contributor address;

City; State; Zip Code

6 Royal Oak Cir Denton TX 76210

Amount of contribution (\$)

\$150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
3**2** FILER NAME

John Ryan

**3** Filer ID (Ethics Commission Filers)**4** Date

2/4/19

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

James and Linda McNatt

**6** Contributor address;

City; State; Zip Code

1303 Woodlake Dr Corinth TX 76210

**7** Amount of contribution (\$)

\$1000.00

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

1/31/19

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Pat and Regina Courtney

Contributor address;

City; State; Zip Code

3941 Fawn Dr Denton TX 76208

Amount of contribution (\$)

\$200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/8/19

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Al McNatt

Contributor address;

City; State; Zip Code

4401 N I-35 #107 Denton TX 76207

Amount of contribution (\$)

\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/4/19

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Chris Fairleigh

Contributor address;

City; State; Zip Code

158 Cardinal Cir Shady Shores TX 76208

Amount of contribution (\$)

\$1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 2		<b>2</b> FILER NAME John Ryan		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 1/10/19		<b>5</b> Payee name City Bank Card			
<b>6</b> Amount (\$) \$200.00		<b>7</b> Payee address; City; State; Zip Code P.O. Box 78009 Phoenix AZ 85062			
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Credit Card Payment		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Credit Card Payment	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 1/24/19		Payee name Total Wines & More			
Amount (\$) \$136.36		Payee address; City; State; Zip Code 1800 South Loop 288, Suite 370 Denton, TX 76205			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Event Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check If Austin, TX, officeholder living expense  Beverages	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 1/29/19		Payee name Grass Routes			
Amount (\$) \$814.87		Payee address; City; State; Zip Code 2541 S I 35 Suite 200-189 Round Rock, TX 78664			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Counsulting Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check If Austin, TX, officeholder living expense  Campaign Management	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 2	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 1/24/19	<b>5</b> Payee name North Texas Fair and Rodeo	
<b>6</b> Amount (\$) \$100.00	<b>7</b> Payee address; City; State; Zip Code 2217 N Carroll Blvd Denton TX 76201	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Space Rental
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>	
Date 2/19/19	Payee name CitiBank Credit Card	
Amount (\$) \$100.00	Payee address; City; State; Zip Code PO Box 78009 Phoenix AZ 85062	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Credit Card Payment	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Payment
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>	

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